



## Miles of Smiles Mobile Dental Clinic

CARTERET COUNTY HEALTH DEPARTMENT  
3820 Bridges Street, Suite A, Morehead City NC 28557



**The Miles of Smiles mobile dental clinic will be moving to your child's school soon.** We are a full service dental practice offering preventive and restorative dental treatment. To be eligible for this service your child needs to be **enrolled in Medicaid or NC Health Choice insurances.** We see children during the school day and send home information on any treatment done. If your child qualifies and you would like to take advantage of this child friendly dental clinic, **please fill out the information below and return the next school day!**

Patient's name: \_\_\_\_\_

DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_ SSN #: \_\_\_\_\_

School: \_\_\_\_\_ Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

Medicaid or Health Choice # \_\_\_\_\_

Does your child have another dentist: Yes ( ) No ( ) If, yes list Doctor's name: \_\_\_\_\_

Parent /Guardian Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Emergency contact: Name \_\_\_\_\_ Phone# \_\_\_\_\_ Relationship: \_\_\_\_\_

**PARENT/ GUARDIAN PLEASE COMPLETE THE MEDICAL HISTORY BELOW:**

Medical Doctor: \_\_\_\_\_

List of Medications: \_\_\_\_\_

List of Allergies: \_\_\_\_\_

**Parent/ Guardian please circle all that apply (past or present) Must be filled out for child to be seen:**

Heart problems/ murmur	Cold Sores	Diabetes	AD/HD/ other emotional disorders	Hepatitis B
High blood pressure	Ulcers	Liver disease	Nervousness	HIV positive
Brain injury	Jaw pain	Bleeding disorder	Asthma	AIDS
Seizures	Kidney problems	Anemia	Sinus problems	Allergies/ Hives
Fear of needles	Gagging problems	Negative dental experience		None apply

Past Surgeries: \_\_\_\_\_

Does your child have any disease or condition that is not listed above: \_\_\_\_\_

Dental Problems: \_\_\_\_\_

*Please note by signing this form you are giving "Miles of Smiles" your permission to evaluate your child's dental needs and then perform any necessary dental procedures including but not limited to: cleanings, fluoride treatments, sealants, fillings, extractions and use of nitrous oxide for anxiety if needed. This form also covers a 6 month follow up visit.*

*The Carteret County Health Department's Notice of Privacy Practices is available upon request or can be picked up at the "Miles of Smiles Dental Mobile Clinic" or at the Health Department located at 3820-A Bridges Street, Morehead City, NC 28557. It is also available online at [www.carteretcountync.gov](http://www.carteretcountync.gov).*

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_